

**On an 8 1/2" X 11" sheet of paper submit the following:**

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**WISCONSIN NATIONAL GUARD ASSOCIATION INC.  
EDUCATION GRANT / PRESIDENT'S SCHOLARSHIP APPLICATION**

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

**SECTION – I**

I am applying for the Education Grant Program - Baccalaureate Degree

I am applying for the President's Scholarship Award (Advanced Degree)

I QUALIFY FOR THIS GRANT BECAUSE I AM: (Check only one category)

A WINGA Member – Grade \_\_\_\_\_ Unit of Assignment: \_\_\_\_\_ (Must be a commissioned or warrant officer)

Spouse of a WINGA Member who is: Grade \_\_\_\_\_ Name \_\_\_\_\_ Unit of Assignment \_\_\_\_\_

An unmarried dependent son or daughter of a WINGA Member who is:

Grade \_\_\_\_\_ Name \_\_\_\_\_ Assigned unit: \_\_\_\_\_

**SECTION – II**

ACADEMIC INFORMATION (Please attach a complete set of transcripts for the entire last year of school)

University – College or School where enrolled (Name) \_\_\_\_\_

Street address, City, State, Zip \_\_\_\_\_

Year completed as of 30 June: 1 2 3 Number of course credits completed during previous academic year \_\_\_\_\_

Number of credits registered for in next semester \_\_\_\_\_ Prior year grade point average \_\_\_\_\_ (1 year avg. – not cumulative)

REMARKS: \_\_\_\_\_

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**(REVERSE SIDE OF FORM MUST BE COMPLETED)**

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NAME: \_\_\_\_\_

SECTION – III

ADDITIONAL INFORMATION

Extra curricular activities \_\_\_\_\_

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Community involvement \_\_\_\_\_

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Work experience (are you currently employed?) \_\_\_\_\_

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Academic Major or Specialty \_\_\_\_\_

Goals and career intentions \_\_\_\_\_

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Special information for board consideration \_\_\_\_\_

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Name and address of local newspaper \_\_\_\_\_

This application along with college transcripts must be received by the deadline date of July 15<sup>th</sup>. Please mail to:  
WINGA Inc. ATTN: Education Grant Program 2400 Wright St, Room 208, Madison, WI 53704-2572